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Bib Data Sheet

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|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------|
| SERIAL NUMBER 10/606,117 | FILING DATE 06/24/2003 RULE | CLASS 607 | GROUP ART UNIT 3766 | ATTORNEY DOCKET NO. 3614/172 |
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APPLICANTS

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** CONTINUING DATA **** *JPO*

This application is a CIP of 10/056,793 01/23/2002 PAT 7,031,776
 which claims benefit of 60/301,877 06/29/2001

** FOREIGN APPLICATIONS **** *JPO*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 11/03/2003

| Foreign Priority claimed | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR | SHEETS | TOTAL | INDEPENDENT |
|---------------------------------|--|----------|---------|--------|-------------|
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after | COUNTRY | DRAWING | CLAIMS | CLAIMS |
| Verified and Acknowledged | <i>Yours truly, P. Oepler</i> Examiner's Signature <i>JPO</i> Initials | IL | 13 | 39 | 5 |

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TITLE

Methods and apparatus for treatment of degenerative retinal disease via indirect electrical stimulation

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|-----------------|---|--|
| FILING FEE | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) |
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